

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>CH</i> | <i>11</i> | <i>11/22/00</i> |
| FORMALITY REVIEW | | <i>60200</i> | <i>1/3</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Cancelled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|-------|
| Final Original | |
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| 3 | 04/05 |
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| Claim | Date |
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| Final Original | |
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| 52 | 13/24 |
| 53 | 04/05 |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy